

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

3032/50187

**CLAIMS AS FILED - PART I**

(Column 1)	(Column 2)
TOTAL CLAIMS	15
FOR	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	15 minus 20 = *
INDEPENDENT CLAIMS	15 minus 3 = *
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	** =
Independent	* Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	RATE
BASIC FEE	355.00
OR	BASIC FEE
X\$ 9=	710.00
OR	X\$18=
X40=	40
OR	X80=
+135=	+270=
TOTAL	395
OR	TOTAL

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	RATE
ADDITIONAL FEE	ADDITIONAL FEE
X\$ 9=	X\$18=
OR	X\$18=
X40=	X80=
OR	X80=
+135=	+270=
TOTAL ADDITIONAL FEE	TOTAL ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	** =
Independent	* Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	X\$18=
OR	X\$18=
X40=	X80=
OR	X80=
+135=	+270=
TOTAL ADDITIONAL FEE	TOTAL ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	** =
Independent	* Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	X\$18=
OR	X\$18=
X40=	X80=
OR	X80=
+135=	+270=
TOTAL ADDITIONAL FEE	TOTAL ADDITIONAL FEE
OR	TOTAL ADDITIONAL FEE

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

NOTICE OF FEE DUE

DATE: 01-15-02

TO: Group 3635

FROM: Office of Initial Patent Examination

SUBJECT: Fee Due

APPLICATION NUMBER: 09/870,347

A fee is due for the attached document submitted to the U. S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorization to charge a deposit account. If an authorization is present, please charge the appropriate fee. If an authorization is not present, notify the applicant of the fee deficiency.

- Insufficient fee by check
- Insufficient funds in deposit account
- Declined credit card
- Non authorization for charge to deposit account
- No fee submitted per requirement

The correct fee code: 202 amount \$ 42

The suspended fee code: 197 amount - \$ 40

Fee Due amount = \$ 2

If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.

Terminal Operator Meago W

RECEIVED  
JAN 18 2002  
GROUP 3635

U.S. PATENT AND TRADEMARKS  
Washington, D.C. 20231

ITEM NUMBER	PLING DATE	FIRST NAMED APPLICANT	ATTY DOCKET NO.
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EXAMINER

09870247

ART UNIT PAPER NUMBER

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

APPLICANT IS GIVEN 30 DAYS FROM THE DATE OF MAILING OF THIS NOTICE WITHIN WHICH TO SUBMIT THE BALANCE DUE. Extension of this 30 day period under 37 CFR 1.136(a) will not be permitted. Failure to respond within this period will result in the application becoming abandoned. 35 U.S.C. 133.

The filing fees submitted in connection with this application are insufficient. See the attached Patent Application-Fee Determination Record (Form PTO-875). The balance due for additional claims and/or multiple dependent claims is summarized below:

A. Filing Fees due upon filing the application

Total Filing Fees Due	= \$ 395
Less Filing Fees Submitted	= \$ (355)
BALANCE DUE	= \$ 40

B. Fees due in connection with the amendment filed on \_\_\_\_\_

Total Fees Due	= \$ _____
Less Fees Submitted	= \$ (_____)
BALANCE DUE	= \$ _____

ATTACHMENT FORM PTO-875

Clerk of Group

APPLICANT: PLEASE COMPLETE THIS PORTION AND RETURN THIS NOTICE WITH PAYMENT  
Fee submitted \$ \_\_\_\_\_ Signature \_\_\_\_\_

### CERTIFICATE OF MAILING

I hereby certify that this notice and the required additional fee are being deposited with the U.S. POSTAL SERVICE as first class mail in an envelope addressed to